Joint Working EXECUTIVE SUMMARY

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Joint Working between AstraZeneca UK Ltd and GP Connect PCN

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Project title	Establishing Quality Improvement Through Partnership
Aims and Objectives	Increase PCN clinical capacity to review the backlog of Cardio, Renal and Metabolic (CVRM) patients caused by COVID-19. The new clinics will be in-addition to the existing clinics normally provided by the GP Practices within the PCN and won't seek to replace existing clinics made available to patients. Reduction in long waiting times to be seen by a 'specialist' Drive improvement of understanding within primary care to effectively manage CVRM patients. Education support for multiple stakeholders within primary care.
Anticipated benefits	**Patient benefits:** • Appropriate initiation and optimisation of medicines by GP in-line with local and national guidelines • More timely access to medication review **NHS benefits:** • To optimise and prioritise care for patients by case finding management of NICE NG28 guideline, for people with type 2 diabetes at the highest risk of cardiovascular and renal complications and offer faster access to evidence based medicines. • Potential for reduced healthcare system costs including unplanned avoidable cardiovascular events in people with type 2 diabetes. • Upskilling of workforce prioritised for delivering type 2 diabetes patients management. • The inclusion of a NG28 clinical template produced and funded by AZ that will support the ongoing consistency of medicine reviews per NG28 guidelines. **AZ benefits:** • Prescription of SGLT2i may increase as more applicable patients are identified. AstraZeneca manufactures medicine in this space, this project is not reliant on prescribing AZ medicine, and the decision to prescribe will remain with the clinician in line with local protocols and guidelines. • A successful project with proven outcome measures will allow the Project Board to share best practice across England.

Timeline	The project will commence 12-Feb-2024 and will continue for 7 months.
Contributions	The project will include the pooling of skills, experience and resources from both parties. AstraZeneca will provide funding for additional clinical time, and AZ employee time for project management and project evaluation at a total cost of £13,545.41. The NHS is contributing clinical time and project analysis at a total cost of £9,030.28. The NHS contribution does not include transfer of monies; it is based on cost of resource allocation. Full details of contributions are included in the agreed Joint working agreement with the NHS.